

FACILITY NAME: EAGLE SIGNAL <sup>AA</sup> CONTROLS DIV. OF DANAHUE CONTROLS  
LOCATION: 736 FEDERAL ST, DAVENPORT IA 52803  
RCRA ID #: IA0051001337 DATE: 02/17/94

IMPACT OF FLOOD AND RAIN QUESTIONNAIRE  
RCRA PROGRAM

1. Is this facility located within approximately 1/2 mile of a river, creek or stream? YES or NO? If YES, what is the name if known? Mississippi River

2. Are there any visual signs that the facility was affected by flood waters? YES or NO? If YES, describe: \_\_\_\_\_

3. Was the facility damaged by the flood water or rain? YES or NO? If YES, generally describe the damage. \_\_\_\_\_

IF THE ANSWER TO QUESTION #3 IS NO, STOP HERE.

4. Was there any damage to inventories, products or waste at the facility that would have caused the facility to generate hazardous waste? YES or NO?

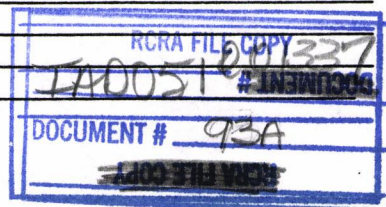
5. Were there any release of hazardous material as a result of the flooding? YES or NO? If yes, describe: \_\_\_\_\_

6. If the answer to question #5 is YES, has remedial activity occurred to address the releases? YES or NO? If YES, describe: \_\_\_\_\_

7. Were there any circumstances (e.g. design criteria) or actions that the facility took that were useful in preventing potential releases or generation of hazardous materials? YES or NO? For the purpose of this question, we are looking for the "lessons learned" that may be useful in future guidance, etc. If YES, describe: \_\_\_\_\_



R00307885  
RCRA RECORDS CENTER



FACILITY NAME: \_\_\_\_\_  
LOCATION: \_\_\_\_\_  
RCRA ID #: \_\_\_\_\_

IF THE ANSWER TO QUESTION #4 IS NO, STOP HERE.

8. Is the facility currently storing hazardous waste generated as a result of the flood? YES or NO? Is the storage area located inside or outside or both? INSIDE (I), OUTSIDE (O) or BOTH (B)? Describe the type and amount of hazardous waste in storage.

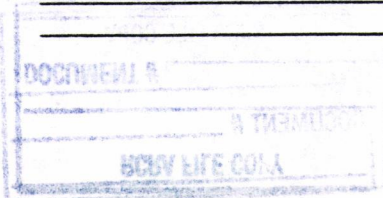
TYPE	AMOUNT	I, O or B
Examples:		
Contaminated MEK	2 - 55 gal. Drums	O (Outside)
Cleaning Products	6 spray bottles	I (Inside)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. Did the facility generate hazardous waste as a result of the flood that was subsequently sent off-site? YES or NO? Describe the type and amount of hazardous waste generated.

TYPE	AMOUNT
Examples:	
Contaminated MEK	2 - 55 gal. Drums
Cleaning Products	6 spray bottles
_____	_____
_____	_____
_____	_____
_____	_____

OTHER COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





Last Revised: 1/25/91

Time to complete screening: \_\_\_\_\_

### RCRA SCREENING CHECKLIST

Inspector: Allen Apperson Primary Media: \_\_\_\_\_

Date: 02/17/94

Facility: EAGLE SIGNALS DIV. OF DANAHER CONTROLS

Facility Address: 736 FEDERAL ST.

DAVENPORT IA

52803

Phone ( 319 ) 328-2053

Contact/Title: RICHARD ERICKSON MFG. MANAGER

SIC #: \_\_\_\_\_ Process: MACHINE SHOP

#### Office Questions:-----

1) Facility description PORTION OF A MULTI-STORY BUILDING,  
THIS CO. OCCUPIED ~55,000 SQ FT.

2) Does facility have an EPA ID number? Yes ☒ No ☐ # IAD051001337

3) What Chemical and/or Industrial Waste (CIW) streams are generated? (list: Name, Amount generated/month, Final disposition) ZINC Chloride, 115 gals/month, Clean Harbors of Chicago; Chromic Acid, 56 gals/month, Clean Harbors of Chicago; XYLENE, 56 gals/month, SAFETY-KLEEN,

4) Does the facility classify any of their CIW's as hazardous waste (HW)? Yes ☒ (please note which ones are classified as HQ) No ☐ ZINC Chloride, Xylene, Chromic Acid.

5) Does the facility conduct any of the following on-site activities: Treatment/Recycling/Burning/Open Dumping /Landfills/Surface Impoundments? Describe: NONE

#### Field Observations:-----

6) Are CIW/HW stored on-site? Yes ☒ No ☐  
Describe (material, approximate quantity, storage method): ALL 55 GAL DRUMS, COPPER CYANIDE, 165 GALS; CHROMIC ACID, 495 GALS;

7) Describe condition of storage containers/tanks (open, damaged, unlabeled, leaking, etc.): ALL CLOSED, ALL LABELED WITH HAZARDOUS WASTE LABELS, NO LEAKS.

8) Are incompatible wastes stored together (acids, bases, solvents, cyanides)? Yes ☐ No ☒ Describe: \_\_\_\_\_

9) Are there any signs of past spills/releases (dead or stressed vegetation, ground discoloration, stains)? Yes ☐ No ☒ Describe \_\_\_\_\_

10) Do any of the on-site Chemical and/or CIW/HW management practices concern you? Yes ☐ No ☒ Describe: \_\_\_\_\_

11) Recommendations and/or Additional Observations: \_\_\_\_\_

WASTE GENERATED AT TIME OF THIS INSPECTION FROM DRAINING TANKS FOR SHUT DOWN OF FACILITY. NO ACCUMULATION DATES ON "HAZ WASTE" LABELS. FACILITY WILL BE COMPLETELY CLOSED DOWN BY END OF FEB. 94. PRODUCTION OPERATIONS ENDED AT END OF DEC. 93.



UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. <b>IA D 0 5 1 0 0 1 3 3 7 0 9 3</b>	Manifest Document No. <b>0 9 0 9 3</b>	Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.
Generator's Name and Mailing Address <b>Signal Controls 736 Federal Street Davenport, IA 52803</b>		Location If Different			A. Illinois Manifest Document Number <b>IL 3960436</b> FEE PAID IF APPLICABLE
4. *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* (319) 328-2050		6. US EPA ID Number <b>IA D 2 0 6 5 3 7 2 3 7</b>			B. Illinois Generator's ID <b>9 1 9 1 6 3 5 0 1 3</b>
5. Transporter 1 Company Name <b>L &amp; M Waste Systems</b>		8. US EPA ID Number			C. Illinois Transporter's ID <b>0 2 2 3</b>
7. Transporter 2 Company Name		10. US EPA ID Number			D. (319) 263-5474 Transporter's Phone
9. Designated Facility Name and Site Address <b>Clean Harbors of Chicago 11800 S. Stony Island Ave. Chicago, IL 60617</b>		10. US EPA ID Number <b>IL D 0 0 0 6 0 8 4 7 1</b>			E. Illinois Transporter's ID F. ( ) Transporter's Phone
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol
a. "RQ" Zinc Chloride Solution, 8, UN1840, III, Corrosive Material		0 0 3 D M 0 0 1 6 5 G			
b. "RQ" Chromic Acid Solution, 8, UN1755, II, Corrosive Material		0 0 1 D M 0 0 0 5 5 G			
c.					
d.					
J. Additional Description for Materials Listed Above a. zinc tank drag out crystal - T13747 b. chromic acid solution - T13746A		K. Handling Codes for Wastes Listed Above In Item #14 G = Gallons Y = Cubic Yards			
15. Special Handling Instructions and Additional Information <b>Emergency # (319) 328-2050 or 1-800-424-8802</b> <b>ERG - a. 60</b> <b>b. 60</b>					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name		Signature		Date Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.		Signature		Date Month Day Year	

This Agency is authorized to require, pursuant to Illinois Revised Statute, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide this information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

COPY 6. GENERATOR'S COPY

In case of a spill call the Illinois Office of Emergency Response at 217 / 782-7860 and the National Response Center at 800 / 424-8802 or 202 / 426-2675.



## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION

SPRINGFIELD, ILLINOIS 62794-9276 (217) 782-6761  
State Form LPC 62 8/81 IL532-0610FOR SHIPMENT OF HAZARDOUS  
AND SPECIAL WASTE.

Form Approved. OMB No. 2050-0039 Expires 9-30-92

SAFETY-KLEEN CORP.  
STATE PRESCRIBED FORM

P.O. BOX 19276

EPA Form 8700-22 (6-89)

NOTE: FORM DESIGNED TO PRINT 8 LINES PER INCH

UNIFORM HAZARDOUS  
WASTE MANIFEST1. Generator's US EPA ID No.  
IAD 051001337Manifest Document No.  
940622. Page 1  
of 1Information in the shaded areas  
is not required by Federal law, but  
is required by Illinois law.3. Generator's Name and Mailing Address  
EAGLE SIGNAL CONTROLS  
736 FEDERAL ST  
DAVENPORT

Location if Different:

IA 52803

A. Illinois Manifest Document Number

IL 5286495

MANIFEST  
FEE PAIDB. Illinois  
Generator's ID 9191635013

C. Illinois Transporter's ID 1123

D. 319 386-3024 Transporter's Phone

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

G. Illinois  
Facility's ID 0310690006H. Facility's Phone  
708 849-4850

4. Generator's Phone ( 319 ) 328-2050

5. Transporter 1 Company Name  
SAFETY-KLEEN CORP.

7. Transporter 2 Company Name

9. Designed Facility Name and Site Address  
SAFETY-KLEEN CORP.  
633 E 138TH ST

0-006-54

ILD 980613913

DOLTON, IL 60419

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

12. Containers  
No. Type13.  
Total  
Quantity14.  
Unit  
Wt/VolI.  
Waste No.a. RQ WASTE FLAMMABLE LIQUID, N.O.S.  
(XYLENE)  
3 UN1993 PG II (F0030(ERG#27))

00 / D M 00055 G

EPA HW Number  
XIXF01013Authorization Number  
0100161EPA HW Number  
XIXAuthorization Number  
XIXEPA HW Number  
XIXAuthorization Number  
XIXEPA HW Number  
XIXAuthorization Number  
XIX

J. Additional Descriptions for Materials Listed Above

11a - SAMPLE #032108, CONTROL #0022935-1  
T(A) D001 F005K. Handling Codes for Wastes Listed Above  
in Item #14 S01 S02 T50

G = Gallons Y = Cubic Yards

S01/S02/T50

15. Special Handling Instructions and Additional Information

0000 43987680 000000 5-047-01-2047 0612

9324 PP#M94062

EMERGENCY RESP#708-888-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR  
SKDOT# A: 2005 B: C: D:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Date

RWE RICKSON

RWE Rickson

Month Day Year  
10/1/89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date

Kurt Oetzelmann

Kurt Oetzelmann

Month Day Year  
06/1/89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date

Month Day Year

19. Discrepancy Indication Space

Line 6 should reflect ILD 984908202

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Signature

Date

ROSE M LAMBERT

Rose M Lambert

Month Day Year  
10/1/89

This Agency is authorized to require, pursuant to Illinois Revised Statutes 1989, Chapter 111 1/2 Sections 1004 and 102, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

COPY 1. TSD MAIL TO GENERATOR

In case of a spill call the Illinois Office of Emergency Response at 217/782-3637 and the National Response Center at 800/424-8802 or 202/426-2675.

PLEASE SEE REVERSE SIDE FOR IMPORTANT INFORMATION

GENERATOR/DESIGNATED REPRESENTATIVE SIGNATURE

PART NO. 1322 (REV. 11/92)



PLEASE TYPE

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (Rev. 9-88)

Form Approved. OMB No. 2050-0039, Expires 9-30-92

UNIFORM <del>HAZARDOUS</del> WASTE MANIFEST		1. Generator's US EPA ID No. N/A	Manifest Document No. 06093	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.	
3. Generator's Name and Mailing Address Eagle Signal Control 736 Federal Street Davenport, IA 52803				A. Illinois Manifest Document Number IL 3960373 FEE PAID IF APPLICABLE		
4. *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* (319) 328-2050				B. Illinois Generator's ID 191191163150113		
5. Transporter 1 Company Name L & M Waste Systems		6. US EPA ID Number N/A		C. Illinois Transporter's ID 10223		
7. Transporter 2 Company Name		8. US EPA ID Number		D. (319) 263-5474 Transporter's Phone		
9. Designated Facility Name and Site Address ESG Watts, Inc. 8400-77th Street W Taylor Ridge, IL 61284		10. US EPA ID Number N/A		E. Illinois Transporter's ID F. ( ) Transporter's Phone		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No. Type		
a. Non-Hazardous Waste Paint Filters				13. Total Quantity 0 1 2 D M 0 0 6 6 0 G		
b.				14. Unit Wt/Vol G		
c.				I. Waste No. EPA HW Number XX IN/A Authorization Number 8 1 9 0 3 1 8 4		
d.				EPA HW Number XX Authorization Number		
J. Additional Description for Materials Listed Above				K. Handling Codes for Wastes Listed Above In Item #14 G = Gallons Y = Cubic Yards		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name x JASON STEWART		Signature x JASON STEWART		Date Month Day Year 06 22 93		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Roger Noz		Date Month Day Year 06 22 93		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.				Date		
Printed/Typed Name JAMES M. ROBINSON		Signature James M. Robinson		Date Month Day Year 06 22 93		

This Agency is authorized to require, pursuant to Illinois Revised Statute, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide this information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.



# Eagle Signal Controls

A Mark IV Industries Company

736 Federal Street  
Davenport, Iowa 52803  
(319) 328-2050

12/2/93

## CERTIFIED MAIL

Mr. Kenneth Herstowski  
EPA Region VII  
726 Minnesota Avenue  
Kansas City, KS 66101

Dear Mr. Herstowski:

This is to inform you that Eagle Signal Controls, IAD051001337, was sold on June 6, 1993, to Danaher Controls, 1675 Delany Road, Gurnee, Illinois 60031, by MARK IV Industries, Inc.

We are presently in the process of closing our Davenport operation and expect to be completely done with our plating activities by December 20, 1993, at which time we will have our waste streams permitted and begin disposal activities.

If you have any questions, please contact the writer.

Sincerely,

R.W. Erickson  
Manufacturing Manager



cc: E. Chinchilla  
J. Thompson  
J. Foged  
D. Martin



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
RECEIPT FOR DOCUMENTS AND SAMPLES

EPA ID#: IAD 051 001 337

Facility Name	EAGLE SIGNAL DIV. OF DANAHER CONTROLS
Facility Address	736 FEDERAL ST., DAVENPORT, IA, 52803

Documents Collected? YES ☒ (list below) NO ☐

Samples Collected? YES ☐ (list below) NO ☒ Split Samples: YES ☐ NO ☐

Documents/Samples were: 1) Received no charge ☒ 2) Borrowed ☐ 3) Purchased ☐

Amount Paid: \$  Method: Cash ☐ Voucher ☐ To Be Billed ☐

The documents and samples described below were collected in connection with the administration and enforcement of the applicable statute under which the information is obtained.

Receipt for the document(s) and/or sample(s) described below is hereby acknowledged:

ILLINOIS MANIFEST #: IL 528 6495  
IL 3960436, IL 3960373

EAGLE SIGNAL CONTROLS LETTER DATED 12/2/93

Facility Representative (print)	Signature/Date
RW Erickson	RW Erickson 2-17-94
Inspector (print)	Signature/Date
Allen Apperson	Allen Apperson 2/17/94
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
CONFIDENTIALITY NOTICE

EPA ID #: IAD 051 001 337

Facility Name	
EAGLE SIGNAL DIV. OF DANAHUE CONTROLS	
Facility Address	
736 FEDERAL ST., DAVENPORT IA 52803	
Inspector (print)	Title
Allen Apperson	INSPECTOR
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	
Date 17 Feb 94	

It is possible that the United States Environmental Protection Agency (EPA) will receive public requests for release of the information obtained during inspection of the facility above. Such requests will be handled by EPA in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. EPA is required to make inspection data available in response to FOIA requests, unless the Agency determines that the data contains information entitled to confidential treatment.

Any or all of the information collected by EPA during the inspection may be claimed confidential, if it relates to trade secrets or commercial or financial matters that you consider to be confidential. If you make claims of confidentiality, EPA will disclose the information only to the extent, and by the means of the procedures set forth in the regulations (cited above) governing EPA's treatment of confidential information.

To claim information confidential, you must certify that each claimed item meets all of the following criteria (40 CFR 2.208):

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.
4. Disclosure of the information would cause substantial harm to your company's competitive position.

In addition, within fifteen (15) calendar days of the claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). This statement should be mailed by registered, return-receipt requested mail to the Inspector at the address listed above. Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

At the completion of the inspection, you will be given a receipt for all materials collected. At that time you may make claims that some or all of the information is confidential and meets the criteria listed above.



November 1993

426

Below is a summary of the information currently in EPA's RCRA Computer Data Base for the INSTALLATION LOCATION and EPA RCRA Identification Number listed.

If any of this information is inaccurate, you may notify us of the change(s) by writing to us, telephoning us, or by completing a Notification of Regulated Waste Activity Form (EPA Form 8700-12), a copy of which is attached, or simply marking any changes on this form and sending it to EPA at:

EPA REGION 7 - RCRA/IOWA  
726 MINNESOTA AVENUE  
KANSAS CITY, KANSAS 66101

Your cooperation in helping us to maintain accurate records is appreciated. If you have any questions, please call the Iowa RCRA Hazardous Waste Inquiry Helpline number (913) 551-7861, and leave a detailed message. Someone will get back to you as soon as possible.

BUSINESS IS CLOSING BY END OF FEB 94. NOW WASTES GENERATED.

EPA RCRA ID Number: IAD051001337

Name of Company/Installation: EAGLE SIGNAL DIV OF ~~MARK IV CO~~ AA DANAHER CONTROLS  
Location of Installation: 736 FEDERAL ST  
DAVENPORT, IA 52803

County:

Mailing Address: 736 FEDERAL ST  
DAVENPORT, IA 52803

Installation Contact: RICHARD ERICKSON  
Job Title: SERVICES MGR  
Phone Number: (319)328-2053  
Contact's Address: 736 FEDERAL ST  
DAVENPORT, IA 52803

Current Owner of Installation: ~~AA GULF & WESTERN MFG~~ DANAHER CONTROLS  
Owner's Address: ~~AA PO BOX 999~~ 1675 DELANY ROAD, 48075  
AA SOUTHFIELD, MI GURNEE, IL, 60031  
Phone Number: AA (313)355-8000  
Land Type: AA Unknown  
Owner Type: AA Unknown  
Regulated Activities: AA FULLY REGULATED GENERATOR  
Regulated Activities: AA STORAGE/TREATMENT FACILITY

Hazardous Wastes Handled: ~~AA D001, F001, F003, F005, F007, F008, F009~~  
~~AA P098, U002, U154, U210, U220, U239~~

Richard W Erickson Richard W Erickson Mgr Mar 2-17-94  
Your Signature Your Name and Official Title Date Signed

All information you submit in a notification can be released to the public, according to the Freedom of Information Act, unless it is determined to be confidential by U.S. EPA pursuant to 40 CFR Part 2. Since notification information is very general, the U.S. EPA believes it is unlikely that any information in your notification could qualify to be protected from release. However, you may make a claim of confidentiality by printing the word "CONFIDENTIAL" on both sides of the Notification Form and on any attachments or submittals including this information report. EPA will take action on the confidentiality claims in accordance with 40 CFR Part 2.

RCRIS data entered  
BY POO AARP/SEE  
ON 10/26/95



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REQUEST FOR CONFIDENTIAL TREATMENT

EPA ID #: IAD051001337

Facility Name	EAGLE SIGNAL DIV. OF DANAHER Controls
Facility Address	736 FEDERAL ST. DANA POINT IA. 52803

Information for which confidential treatment is requested:

NONE

Acknowledgement of Claimant

The undersigned requests that confidential treatment of the information described be provided in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. The undersigned further acknowledges that they are authorized to make such claims for their firm.

The undersigned also certifies that each claimed item described above meets all of the following criteria (40 CFR 2.208):

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing of special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.
4. Disclosure of the information would cause substantial harm to your company's competitive position.

In addition, within 15 days of your claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

Authorized Representative (print)	Signature/Date
R.W. Erickson	W. Erickson 2-17-94
No confidential treatment claimed during the inspection: <u>WWE</u> (Facility Representative's initials)	
Inspector (print)	Signature/Date
Allen Apperson	Allen Apperson 2/17/94
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	



U.S.EPA INSPECTION CONFIDENTIALITY NOTICE (cont.)

EPA ID #: IAO 051001337

Facility Name
EAGLE SIGNAL Div. OF DANAHER CONTROLS
Facility Address
736 FEDERAL ST., DAVENPORT IA. 52803

If you are not authorized by your company and there is no one on the premises of the facility who is authorized to make confidentiality claims, this notice will be sent by certified mail, along with the receipt for documents, samples, and other materials, to the authorized representative designated below.

Authorized Representative \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

If the authorized representative listed above requests confidential treatment, they must return a statement specifying any information which should receive confidential treatment and written comments in support of the claim based on factors listed in 40 CFR 2.204(e)(4).

This statement from the authorized representative should be mailed by registered, return-receipt requested mail within fifteen (15) calendar days of receipt of the Confidentiality Notice to the Inspector at the address listed on page 1.

Failure to submit confidentiality claims and comments within the fifteen (15) day period will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

=====

To be completed by the facility official receiving this Notice:

I have received and read this Notice.

Facility Representative Provided Notice (print)	Title
R.W. Erickson	MFg Mgr
Signature/Date	
R.W. Erickson	2-17-94

(rev:1/20/93)



### RCRIS HANDLER INFORMATION

This form completed on 17 FEB 94 (date) by Allen Apperson (name of person completing form)  
INSTALL & EOD (name of person's employer), TES X Contractor.

Instructions for completing form: Completion of all items in BOLDFACE is REQUIRED; completion of other items is optional, subject to the availability of the information.

**EPA RCRA ID NUMBER:** IA D051001337

**1. NAME OF INSTALLATION** (COMPANY CURRENTLY OCCUPYING SITE):

EAGLE SIGNAL DIVISION OF DANAHAR CONTROLS

**2. LOCATION OF INSTALLATION** (PHYSICAL ADDRESS, NOT PO BOX OR RURAL ROUTE NUMBER; ADDRESS MUST BE SPECIFIC; IF NECESSARY, INCLUDE DIRECTIONS ON HOW TO FIND THE INSTALLATION)

- EXAMPLES OF UNACCEPTABLE INSTALLATION ADDRESSES ARE: "Box 47," "RR #3," "Curtis Ave," "Hwy 49 West"  
 - EXAMPLES OF ACCEPTABLE ADDRESSES ARE: "123 Main St," "1 mile west of Hwy 6 on County Road EE," "J 12," "NW corner of Jackson and Jefferson Streets"

**STREET ADDRESS:** 736 FEDERAL ST.

**CITY/ZIP CODE:** DAVENPORT, **IA** 52803

**3. INSTALLATION MAILING ADDRESS** (IF SAME AS LOCATION ADDRESS, WRITE "SAME"):

**STREET ADDRESS:** SAME

**CITY/ZIP CODE:** \_\_\_\_\_, **IA** \_\_\_\_\_

**4. INSTALLATION CONTACT PERSON:**

**Name:** RICHARD ERICKSON

**Title:** SR MANUFACTURING MANAGER

**Telephone Number:** Area Code (319) 328-2053

**Street Address:** 736 FEDERAL ST.

**City/Zip Code:** DAVENPORT, **IA** 52803

**5. OWNERSHIP INFORMATION:**

**Name of Installation's Legal Owner:** DANAHAR CONTROLS

**Street Address:** 1675 DELANY ROAD

**City/Zip Code:** GURNEE, **IL**, 60031

**Telephone Number:** Area Code (\_\_\_\_\_) unknown

**6. RCRA REGULATED ACTIVITY APPARENTLY BEING CONDUCTED AT SITE**

(CHECK ALL THAT APPLY)

☐ **Hazardous waste generation** ☐ **Hazardous waste transportation**

☐ **Conditionally exempt small quantity generator**

☐ **Transports waste for self only**

☐ **Small quantity generator**

☐ **Transports waste for hire**

☐ **Large quantity generator**

☐ **Other: (specify)** \_\_\_\_\_

**7. COMMENTS:** FACILITY HAS SHUT DOWN OPERATIONS AT

THIS SITE, ALL WASTES ON SITE ARE FROM DRAINING

TANKS ETC AND READY FOR SHIPMENT. REMAINING PERSONNEL

ARE JUST CLOSING DOWN FACILITY.

(INCLUDE INFORMATION HERE SUCH AS, IF THE COMPANY LISTED IN RCRIS AS OCCUPYING THE SITE IS NO LONGER THERE, DID THEY GO OUT OF BUSINESS OR MOVE TO A NEW LOCATION, AND IF KNOWN, WHAT IS THAT NEW LOCATION)

RCRIS data entered

BY

ON

ROD ADRI/SEE  
10/26/95



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**Facility:** Eagle Signal Division of Danaher Controls

**Location:** Davenport, Iowa

**Photographer:** Allen Apperson

**Witness:** None

**Date:** February 20, 1994

**Direction:** --

**Camera Type:** Minolta 35mm

**Film Type:** 100 ASA

**Time:** 1111

**Subject:** Site #426 identification sheet.

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**Facility:** Eagle Signal Division of Danaher Controls

**Location:** Davenport, Iowa

**Photographer:** Allen Apperson

**Witness:** None

**Date:** February 20, 1994

**Direction:** West

**Camera Type:** Minolta 35mm

**Film Type:** 100 ASA

**Time:** 1111

**Subject:** GPS equipment in parking area in front of facility.



SOP No. 2110.3A tPA ID #: IAD051001337

## GPS FIELD SHEET

Name: EAGLE SIGNAL DIV. OF DANAHOR CONTROLS Date: 20 FEB 94

Accuracy required:  $\pm 25$  Meters (or better)

Time: X CST    CDT    MST    MDT

Time observation began 11/06  
                        hr/min

Time observation ended 11/22  
                        hr/min

Antenna Height: 3 slope distances using measuring rod (100 centimeters = 1 meter)

1.73m

Average slope distance from above measurements:                      meters

Receiver EPA No.:

File Name: SITE# 426

Verbal Description of weather: +35°F, WIND 10-15 mph FROM WEST, OVERCAST

Obstructions (building, electric poles, etc.): ELECTRIC POWER  
LINE OVERHEAD

Verbal Description of point (site name, state, city, county,  
and associated sample numbers, etc.): EAGLE SIGNAL DIVISION OF  
DANAHER CONTROLS, IOWA, DAVENPORT, SCOTT

Deviations from SOP:

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**Facility:** Eagle Signals Division of Danaher Controls

**Location:** Davenport, Iowa

**Photographer:** Allen Apperson

**Witness:** None

**Date:** February 17, 1994

**Direction:** --

**Camera Type:** Minolta 35mm

**Film Type:** 100 ASA

**Time:** 1535

**Subject:** Site #426 identification sheet.

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**Facility:** Eagle Signals Division of Danaher Controls

**Location:** Davenport, Iowa

**Photographer:** Allen Apperson

**Witness:** None

**Date:** February 17, 1994

**Direction:** Northeast

**Camera Type:** Minolta 35mm

**Film Type:** 100 ASA

**Time:** 1537

**Subject:** Collection of 55-gallon drums, three containing copper cyanide, nine with chromic acid, five with nickel non-hazardous liquid, four with caustic alkali liquid, three with chrome solids. The remaining drums are empty. All have "Hazardous Waste" labels. All closed, but have no accumulation dates.